

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Leave The Poor Man's Tiny Hands Alone PAC

ADDRESS (number and street)

1621 NE Killingsworth St.



(Check if address is changed)

Apt. 7

Portland

CITY ▲

OR

STATE ▲

97211

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address is changed)

leavehispoorlittlehandsalone@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address is changed)

2. DATE

03 / 24 / 2016

3. FEC IDENTIFICATION NUMBER ►

C C00612788

4. IS THIS STATEMENT ☒ NEW (N) OR ☐ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Stephen Judkins

Signature of Treasurer

Stephen Judkins

[Electronically Filed]









Date

03 / 24 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

1.  FEC ID number **C** 
2.  FEC ID number **C** 
3.  FEC ID number **C** 
4.  FEC ID number **C** 

Write or Type Committee Name

Leave The Poor Man's Tiny Hands Alone PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Stephen Judkins

Mailing Address 1621 NE Killingsworth St.

Apt. 7

Portland

OR

97211

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Stephen Judkins

Mailing Address 1621 NE Killingsworth St.

Apt. 7

Portland

OR

97211

Title or Position
Treasurer

CITY

STATE

ZIP CODE

Telephone number

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

US Bank

Mailing Address

636 SE Grand Ave

Portland

OR

97214

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
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Form/Schedule: F1N
Transaction ID :

We are concerned citizens who believe we give our enemies a potentially catastrophic head start by discussing the poor man's tiny hands.

Form/Schedule:
Transaction ID: